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CERTIFICATE OF MAIL

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Grace Alicea

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of:

Date: August 5, 2003

Jason C. FAN et al.

Confirmation No.: 7539

Serial No.: 09/519,441

Group Art Unit: 2663

Filed: March 3, 2000

Examiner: George, Keith M.

For: ROUTING SWITCH DETECTING CHANGE IN SESSION IDENTIFIER
BEFORE RECONFIGURING ROUTING TABLE

RECEIVED

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AUG 12 2003
Technology Center 2600

AMENDMENT

Sir:

In response to the Office Action dated July 7, 2003, please amend the above-identified application in the following manner:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 8 of this paper.

08/11/2003 AADDF01 00000038 09519441

01 FC:2201

42.00 OP



TRANSMITTAL FORM

Attorney Docket No.
M8564/2669P2563
\$Re the application: **Jason C. FAN et al.**Serial No: **09/519,441**Group Art Unit: **2663**Filed: **March 3, 2000**Examiner: **George, Keith M.**For: **Routing Switch Detecting Change in Session Identifier Before Reconfiguring Routing Table**

ENCLOSURES (check all that apply)					
<input checked="" type="checkbox"/>	Amendment/Reply	<input type="checkbox"/>	Assignment and Recordation Cover Sheet	<input type="checkbox"/>	After Allowance Communication to Group
<input type="checkbox"/>	After Final	<input type="checkbox"/>	Part B-Issue Fee Transmittal	<input type="checkbox"/>	Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/>	Information disclosure statement	<input type="checkbox"/>	Letter to Draftsman	<input type="checkbox"/>	Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/>	Form 1449	<input type="checkbox"/>	Drawings	<input type="checkbox"/>	Status Letter
<input type="checkbox"/>	(X) Copies of References	<input type="checkbox"/>	Petition	<input checked="" type="checkbox"/>	Postcard
<input type="checkbox"/>	Extension of Time Request *	<input type="checkbox"/>	Fee Address Indication Form	<input type="checkbox"/>	Other Enclosures (please identify below)
<input type="checkbox"/>	Express Abandonment	<input type="checkbox"/>	Terminal Disclaimer	AUG 1 2 2003 Technology Center 2600	
<input type="checkbox"/>	Certified Copy of Priority Doc	<input type="checkbox"/>	Power of Attorney and Revocation of Prior Powers		
<input type="checkbox"/>	Response to Incomplete Appln	<input type="checkbox"/>	Change of Correspondence Address		
<input type="checkbox"/>	Response to Missing Parts	*Extension of Term: Pursuant to 37 CFR 1.136, Applicant petitions the Commissioner to extend the time for response for xxxxx month(s), from to .			
<input type="checkbox"/>	Executed Declaration by Inventor(s)				

CLAIMS					
FOR	Claims Remaining After Amendment	Highest # of Claims Previously Paid For	Extra Claims	RATE	FEE
Total Claims	15	21	0	\$9.00	\$ 0.00
Independent Claims	4	3	1	\$42.00	\$42.00
				Total Fees	\$42.00

METHOD OF PAYMENT	
<input checked="" type="checkbox"/>	Check no. 6312 in the amount of \$42.00 is enclosed for payment of claim fee.
<input type="checkbox"/>	Charge \$ _____ to Deposit Account No. _____ (Account Holder Name) for payment of fees.
<input checked="" type="checkbox"/>	Charge any additional fees or credit any overpayment to Deposit Account No. 02-2120 (Sawyer Law Group LLP).

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Attorney Name	Michele Liu, Reg. No. 44,875
Signature	
Date	August 5, 2003

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Type or printed name	Grace Alicea
Signature	